Effective October 1, 2000 69/839(6/6											16		
CLAIMS AS FILED - PART I SI (Column 1) (Column 2) T										NTITY	OTHER THAN OR SMALL ENTITY		
TO	TAL CLAIMS		7					RAT	E	FEE	l i	RATE	FEE
FO	R		NUMBER FILED		NUMBER EXTRA			BASIC	FEE	355.00	OR	BASIC FEE	·710.00
TOTAL CHARGEABLE CLAIMS			7 minus 20=		· Ø			X\$ 9	<u> </u>		OR	X\$18=	
INDEPENDENT CLAIMS			minus 3 =		9			X40:	=		OR	X80=	
MU	LTIPLE DEPEN	DENT CLAIM PF	RESÈNT	ESÈNT /				+135	<u> </u>		OR	+270=	
* If	the difference	in column 1 is	TOTA	۱L		OR	TOTAL	710					
CLAIMS AS AMENDED - PART II										-		OTHER SMALL	THAN
		(Column 1) CLAIMS	1	(Colui		(Column 3)	1 :	SMA		ENTITY	OR	SIVIALL	
AMENDMENT A		REMAINING AFTER AMENDMENT			BER OUSLY	PRESENT EXTRA		RAT	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		= .		X\$ 9	=		OR	X\$18=	
	Independent	*	Minus	***		=		X40=			OR	X80=	
L	FIRST PRESE	NTATION OF MU	JLTIPLE DE	PENDEN'	T CLAIM		Ţ	+135	=		OR	+270=	
· · · · · · · · · · · · · · · · · · ·											OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colu	mn 2)	(Column 3)		ADDIT. F	-EE			AUDII. FEE	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA		RAT	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=] '	X\$ 9	=		OR	X\$18=	
	Independent	*	Minus	***		<u> </u>		X40:	=		OR	X80=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+135	=		OR	+270=	
TOTAL ADDIT. FEE (Column 1) (Column 2) (Column 3)											OR	TOTAL	
											•	ADDIT. FEE	
<u>.</u> .	CLAIMS		HIGH	HEST				_	ADDI-	1	F	ADDI-	
AMENDMENT C		REMAINING AFTER AMENDMENT		PREVI	MBER OUSLY FOR	PRESENT EXTRA		RAT	Ε	TIONAL		RATE	TIONAL FEE
	Total	*	Minus	**		=		X\$ 9	=		OR	X\$18=	
	Independent	*	Minus	***		=		X40:			1	X80=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM										OR		
	If the enterior action	mn 1 is loss than t	ha antru in a-l	ump O weit	'a "O" in a	olumn 3		+135			OR	+270=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.													
	The "Highest Nun	nber Previously Pa	id For" (Total	or Independ	dent) is th	e highest numb	oer fo	und in th	e ap	propriate bo	x in co	olumn 1.	

plication or Docket Number



Name/Number: 09839616

Start Date: Any Date

Total Records Found: 4

End Date: Any Date

Accounting Date	Sequence Num.	Tran Type	Fee Code	Fee Amount Mailroom Date	Payment Method
04/25/2001	00000047	<u>1</u>	<u>101</u>	\$710.00 04/20/2001	DA 132512
01/04/2002	00000004	<u>1</u>	<u>141</u>	\$1,280.00 01/02/2002	DA 132512
02/07/2002	00000051	<u>1</u>	<u>141</u>	-\$1,280.00 01/02/2002	DA 132512
02/07/2002	00000052	<u>1</u>	<u>118</u>	\$1,440.00 01/02/2002	DA 132512